PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999

Application or Dock t Number

09/523533

CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL TYPE	ENTITY	OR	OTHER	
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE	7	RATE	FEE
BASIC FEE										420	OR		
TOTAL CLAIMS			30	minus	20=	. 10	·		X\$ 9=	90	OR	X\$18=	
INDEPENDENT CLAIMS			5	minus	3 =	. 2			X39=	78	OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTAL	588	OR	TOTAL	
	CLAIMS AS AMENDED - PART II								SMALL		OR	OTHER SMALL	
	(Column 1) (Column 2) (Column 3)							_	SMALL		5 I	SWALL	
ENT A	REM AF		AINING FTER NOMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL FEE
AMENDMENT	Total	• -	7	Minus	••	20	=		X\$ 9=		OR	X\$18=	
AME	Independent	• 2	<u></u>	Minus	•••	3	=		X39=		OR	X78=	
	FIRST PRESE	NIATIC	ON OF MU	JETIPLE DEI	ENL	PENYCLAIM		ſ	+130=		OR	+260=	
								L	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Coli	umn 1)		(C	olumn 2)	(Column 3)	•		•			
AMENDMENT B		CL	AIMS	100 March 1989		HIGHEST		Γ		ADDI-			ADDI-
		A.F	AINING FTER IDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	.3	3	Minus	**	30	= 3		X\$ 9=	2-	DR	X\$18=	
	Independent	•		Minus	***			۱.	X39=		OR	X78=	
	FIRST PRESE	NIAIIC	N OF MI	JUNPLE DEI	ENL	ENT CLAIM		Γ	+130=		OR	+260=	
22 mo-overpel								L. Al	TOTAL DDIT, FEE	22.	OR ,	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)													
ENT C		CL REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•2	5.	Minus	••	<u> 33 -</u>	= /		X\$ 9= ·	,	OR	X\$18=	
AR BE	Independent	• /	· ·	Minus	***	<u> </u>	=/		X39 =		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+260=	
• #	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."											TOTAL	
}	f the "Highest Nur I the "Highest Nur The "Highest Num	nber Pre	viously Pa	id For IN THI Id For IN THI	S SPA S SPA	CE is less that CF is less tha	n 20; enter "20." n 3. enter "3."		DDIT. FEE	orooniate box		ADDIT. FEE l umn 1.	
7	ne mignest NUM	uer Pfe\	nously Pal	o con tinging	, rue	terment is nue	radinar immon		رب ت				